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PTO/SB/21 (01-08) Approved for use through 07/31/2008. OMB 0651-0031

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	Application Number	10/604,147)					
TRANSMITTAL	Filing Date	June 27, 2003	June 27, 2003 RECE						
FORM	First Named Inventor	Dante Monte	CENTRAL FAX CEN						
	Art Unit	3622		OCT 1 4 200					
(to be used for all correspondence after initial filing)	Examiner Name	Jeffrey D. Car	Ison	0011420					
Total Number of Pages in This Submission	Attorney Docket Number	35041-400100							
ENCLOSURES (Check all that apply)									
Fee Transmittal Form	Drawing(s)		After A	Illowance Communication to TC					
Fee Attached	Licensing-related Papers			l Communication to Board eals and Interferences					
Amendment/Reply	Petition Petition to Convert to a		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)						
After Final	Provisional Application Power of Attorney, Revocation	, 🗆		etary Information					
Affidavits/declaration(s)	Change of Correspondence		Status Letter Other Enclosure(s) (please ident below):						
Extension of Time Request Express Abandonment Request	Request for Refund								
Information Disclosure Statement	•								
Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 Remarks Remarks In the event any fees are necessary to be paid, the Commissioner is authorized to debit Deposit Account No. 19-1351.									
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm Name Seyfarth Shaw LLP)								
Signature									
Printed name Jes ph H. Herron									
Date October 13, 2008		Reg. No. 53,01	19						
CERTIFICATE OF TRANSMISSION/MAILING									
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Signature Deborah & Dudel									
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PTO/SB/17 (10-07)

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Fees pursuant to the Conso.			Application Number	10/604,1	47	CENTRAL FAX	EN		
FEE TR	ANS	MITTAL	Filing Date	June 27	, 2003	OCT 1			
For FY 2008		First Named Inventor	Dante M	onteverde	oci 1 4	4008			
FOI F1 2000		Examiner Name	Jeffrey D). Carlson		1			
Applicant claims small	entity status.	See 37 CFR 1.27	Art Unit	3622	•		1		
TOTAL AMOUNT OF PA	YMENT	(\$)60.00	Attorney Docket No.	35041-4	00100		1		
METHOD OF PAYMEN	IT (check al	I that apply)					1		
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Deposit Account Deposit Account Number: 19-1351 Deposit Account Name: Sevfarth Shaw LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
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FEE CALCULATION					···		1		
1. BASIC FILING, SEA	ARCH, AND	EXAMINATION FEES	5						
	FILING		ARCH FEES	EXAMINA	TION FEES				
Application Type		Small Entity	Small Entity (\$) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)			
Application Type Utility	Fee (\$) 310	Fee (\$) Fee	10 255	210	105	Lags Laid (4)			
Design	210		00 50	130	65	····			
Plant	210		10 155	160	80				
Reissue	310		10 255	620	310				
Provisional	210		0 0	0	0				
2. EXCESS CLAIM FE			•	_	•	mall Entity			
Fee Description					Fee (\$)	Fee (\$)			
Each claim over 20 (in	cluding Reis	ssues)			50	25			
Each independent clair	•	cluding Reissues)			210	105			
Multiple dependent claims					370 Multiple Dens	185 endent Claims			
Total Claims - 20 or Hi	Extra Cla	aims <u>Fee (\$)</u> x =	Fees Paid (\$)		Fee (\$)	Fee Paid (\$)			
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3. APPLICATION SIZE	E FEE	as award 100 aboats	of paper (excluding elec	otronically fil	ad carmance or	computer	1		
listings under 37 (TRR 1.52(e)	igs exceed for sheets to the application size i	fee due is \$260 (\$130 fo	or small entity	for each add	itional 50	1		
sheets or fraction t	hereof. See	35 U.S.C. 41(a)(1)(G	and 37 CFR 1.16(s).				1		
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4. OTHER FEE(S)		7400 C / 13 -	ta i ataa aii aa			Fee Paid (\$)			
Non-English Specification, \$130 fee (no small entity discount)						60.00			
Other (e.g., late filing surcharge): One-Month Extension of Time							1		

SUBMITTED BY		
Signature	Registration No. 53,019 (Attorney/Agent)	Telephone 312-460-5000
Name (Print Type) Joseph H. Herron		Date October 13, 2008

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